There are cases on record of patients labouring under typhus fever, who, with. out being in the slightest degree jaundiced, saw every thing vellow. are also numerous instances of various colours, differing from the natural hues of the objects, being seen by patients in consequence of affections of the nervous system; and hence it is extremely probable that many cases of vellow vision in jaundice may depend upon a functional lesion of the optic nerves. I have one fact to bring forward on this subject of great importance. In the case of jaundice from aneurism of the hepatic artery, the patient saw every thing intensely yellow, until a few days before death, when all yellow vision subsided, and he saw objects of their natural colour, though the jaundice continued, if possible, more intense than ever. In this case there was no inflammation of the eye. I do not think that Dr. Elliotson's observations apply to all cases of this phenomenon. All that he has said is, that where the cornea is in a state of inflammation, there is a greater probability that there will be yellow vision in the affected eye or eyes; and this can be easily accounted for by the increased size of the vessels which the inflammatory process brings on. We may, however, conclude, that in some cases the alteration of vision may be owing to a vellow state of the humours of the eye, that in some it is the result of inflam. mation, and that in some it may be fairly attributed to a lesion of innervation. I think that the latter statement is borne out by the facts that there is a want of constancy in the occurrence of this phenomenon, that it is often of a more or less intermittent character, being one day present, and another day absent, and that it has been observed in cases where not the slightest symptom of jaundice existed. We must also bear in mind, that some of the most remarkable nervous symptoms commonly occur in jaundice, such as coma, &c.; and we may inquire how far the occurrence of yellow vision may be looked on as an indication of an excited state of the brain, and so lead us to measures calculated to remove impending danger.-Ibid.

8. On Icterus Infuntum. By WILLIAM STOKES, M. D .- One of the first discases of children is the icterus infantum, or, as it has been termed by nurses, the yellow gum. Children, shortly after birth, without any known cause, become suddenly jaundiced, and this, after continuing for some days, goes off, frequently without any treatment. This form of jaundice appears to depend upon some particular irritation of the intestinal canal, which seems to result from the circumstance of the digestive system being called into active exertion for the first time, and receiving a new stimulus from the mother's milk. It is a curious fact, that this form of jaundice generally disappears spontaneously. Now, it is remarkable, in this as well as in other cases, (when we recollect the nature of jaundice, and that there exists in the fluids of the body an irritating substance like bile,) that the effects of an admixture of the biliary secretion with those fluids should not be attended with more striking symptoms. In some instances we shall have intense jaundice without any particular effect upon the economy. There is some itching of skin, ardor uring, a little depression of spirits, and vertigo, which last for a few days and then disappear. Gregory mentions many cases of persons affected with jaundice who went about their ordinary business, and performed all the functions as if in a state of perfeet health, eating, drinking, and sleeping in their usual manner. I have myself seen persons who laboured under this affection for more than a year, and yet had all that time their digestion good, their bowels regular, the flow of urine natural, and the circulatory, nervous, and respiratory systems apparently conformable to the standard of health. Dr. Blundell gives the cases of two children who lived for four months, apparently well fed and healthy; and, on opening their bodies, it was found that the biliary ducts terminated in a cul-desac, and that, consequently, not a drop of bile had been discharged into the intestines. Sir Everard Home gives a remarkable case of the total absence of the gall-bladder, and no passage of bile into the intestines, occurring in connexion with a perfect state of health. These are curious facts, and should be borne in memory. I remember two cases of protracted jaundice in the persons of two male servants, who were admitted into the Meath Hospital with symptoms of irritation in the upper part of the digestive tube. From this both recovered under an appropriate treatment, but the jaundice continued in one for eighteen, and in the other for sixteen months. One of them, a stout, well-built, and fully developed man, came into the hospital some time afterwards in the apparent enjoyment of perfect health, except that he had still the jaundiced colour. He wished to be taken into the hospital to get cured of his jaundice, stating that, in consequence of the peculiarity of his appearance, he could not get a place any where, and was in a very distressed condition. From these facts it seems fair to conclude, that the symptoms of other affections, occurring after jaundice, are owing to some other cause than the bilious state of the blood.—Bid.

9. Jaundice from Gastro-duodenitis.—This form of jaundice, taking all its causes into account seems to be the most common. The pathological expression for this form of the disease is, that it is inflammation of the upper portion of the digestive tube, or in other words, that it is the result of a gastro-duodenitis. In this case an inflammatory affection of the stomach and duodenum acts sympathetically on the liver, and we have jaundice occurring independent of hepatic inflammation or mechanical obstruction to the flow of bile. This variety of the disease it is important you should be accurately acquainted with, as it is not only exceeding common in temperate climates, but because I believe it is a great cause of mortality in warm countries, and that the yellow fever of the tropics is reducible in a great measure to this form of disease. In other words, that the cause of the yellowness and many other of the symptoms is to be referred to an intense irritation or inflammation of the digestive tube, with a predominance of that irritation in its upper portion.

The jaundice which depends upon gastro-duodenal inflammation was first accurately described by Broussais. Dr. Marsh has also made many valuable additions to our knowledge on this subject in his paper on jaundice, published in the fifth volume of the Dublin Hospital Reports. You will find too, that in a case of jaundice described by John Hunter, he suggests the possibility of its being preceded by inflammation of the duodenum. But I believe we are chiefly indebted to Broussais for our first correct notions of the pathology of

this disease, and for its scientific and successful treatment.

The disease may occur in the acute form, or it may come on in a slow insidious manner; but in either case, as far as my experience goes, it is always accompanied by symptoms referable to a morbid state of the mucous membrane of the intestines. Dyspeptics and individuals subject to diarrhea are liable to it, but it may also attack strong and healthy persons from the two following causes. A man is exposed to considerable heat, his body is bathed in perspiration, he experiences some degree of lassitude, and is very thirsty; in this state he takes a large draught of cold water. In a few hours afterwards he begins to feel uneasy, and complains of being unwell; he gets shivering, nausea, thirst, and fever, and this fever and thirst with bilious symptoms, (as they are called,) continues for two or three days, when some morning on awaking, the patient is surprised to find himself jaundiced. The same thing may happen as a consequence of error in diet. A person eats at supper a quantity of indigestible food, next day he has vomiting and thirst, and in a day or two more jaundice appears. I may remark here, that this indisposition of two or three days' standing is a very curious and interesting feature in the disease, and would seem to be connected with the progress of disease in the mucous surface of the stomach and duodenum. Jaundice from gastro-duodenitis generally occurs in this country under two varieties. The first is an extremely mild disease; it comes on with very slight and transient symptoms of constitutional or local derangement, it seldom prevents the patient from pursuing his ordinary avocations, and generally disappears without any trouble. The second variety is as extremely severe